





## STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

63

For filing with the Department of Ecology or with County Conservancy Boards

## A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF

	DATE A FEE \$_{ CHECK ECY Co SEPA:	TOR OFFICE USE ONLY  CHANGE NO. CG3-F03IIIC WRIA 42  DATE ACCEPTED 5 1 14 109 BY  FEE \$ GG. REC'D 1 1  CHECK No. 4061-16.67 4/21/09  ECY Coding: 001-002-WR10285-000011  SEPA: □ Exempt Not exempt  AL SHEETS (PLEASE PRINT OR TYPE CLEARLY)**				
1. Applicant Information:  APPLICANT/BUSINESS NAME	DHON	IE NO.	FAX NO.			
ISAAK LAND INC.			(509)632-5546			
ADDRESS Po. 953 CITY Coulee City	STAT	E	ZIP CODE 99/15			
			Tanking			
CONTACT NAME (IF DIFFERENT FROM ABOVE)		IE NO.	FAX NO. (509)632-5546			
ADDRESS ADDRESS AD. 953 CITY Coulee C, ty	STAT		ZIP CODE 99/15			
2. Water Right Information:						
WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(					
14 76 - A  DO YOU OWN THE RIGHT TO BE CHANGED? ▼YES □ NO	MINNIS	J. Ela	er			
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:  HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST I	FIVE (5) YEARS?	YES NO				
Please attach copies of any documentation that del was established. Also, if you have a water system application.						
FOR OFF APP. NO. 3/// PERMIT NO. 28/3 CE	ICE USE ONLY RT. NO. <u>1476 - A</u>	CERT. OF CHA	NGE NO			

SOURCE	5/25 NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Wett	1	NE	SW	16	25	30	18182 3000	WELL IAG#
11214	2	NW	SE	16	25	30		
wall	1 4	/\ w	36	16	23	30	1818 22,001	2
. Proposed	Luc	T		000				<u> </u>
SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Proposed SEE	A	++1	ach	me	vt.			
O YOU OWN THE EXISTING AND XISTING: ☑ YES ☐ NO							ER(S) NAME:	
Please include copies of all the nearest section corner of No. 6 (remarks) or as an attached.  Purpose of Use:  A. Existing	to the al	bove po	orts inv	olved of diver	with this rsion/witi	proposa hdrawal,	al. Also, if you know t please include that in	the distances nformation in
PURPOSE OF US	SE.	100	GP	M or CF	S ACR	E-FT/YR	PERIOD OF	USE
Invigation	X			00	64		Seasonal	
/	1						April 1, To	Oct 3
3. Proposed	<b>-</b>		-	M or CF	2 105	RE-FT/YR	DEDICE OF	
PURPOSE OF US	DE .			O O	6 ACK		Scasona/	- USE
-rrigation			Co		6	70	SCASONAL	
							Diamil 1	Ont 3
5 Place of Use:	•						April, 1 To,	Oc.f3
							April, To,	Oc.f _3
A. Existing					THE RESERVE AND ADDRESS OF THE PARTY OF THE		ENTLY USED:	
A. Existing  LE Wells 1, And 2	GAL DES	160	A		wit			
A. Existing  LE Wells 1, And 2	2)	160	A	cres	wit		ENTLY USED:	
A. Existing  LE  Wells 1, And 2  P. Sec. 16, T.	2)	160	30 E	EVES EW, A	wit		ENTLY USED:	, And So
A. Existing  LE  Wells 1, And 2  P. Sec. 16, T.  14 14 SEC.	ŹŚN,	160 B.	30 E	EVES EW, A	county		ENTLY USED: S/2 SE/4	, And So
A. Existing  LE  Wells 1, And 2  F Sec. 16, T.  14 14 Sec. 14 16	25N, TWP. 25	RG   30	30 E	Gran	wif	hix	ENTLY USED: S/2 SE/4  PARCEL#	# OF ACRE
LE Wells 1, And 2 P Sec. 16, T.  14 14 SEC. SE 14 SEV 14 16 DO YOU OWN ALL THE LANDS IN	25N, TWP. 25	RG   36	30 E	Gran	wif	hix	PARCEL #	# OF ACRE
LE Wells 1, And 2 P Sec. 16, T.  4 4 SEC. SE 14 SW 14 16 DO YOU OWN ALL THE LANDS IN B. Proposed	TWP.	RG 30	A (30 E	Gras Gran	COUNTY	h . ox	PARCEL #  18/82 300 0  F NO, PROVIDE OWNER(S)	# OF ACRE
LE Wells 1, And 2 P Sec. 16, T.  4 4 SEC. SE 14 SW 14 16 DO YOU OWN ALL THE LANDS IN B. Proposed	TWP. Z.5 THE EXIS	RG 30	A CE OF L	Grands V	COUNTY  YES	NO-I	PROPOSED:	# OF ACRE
LE  Wells 1, And 2  P Sec. 16, T.  14 14 SEC.  SE 14 SW 14 16  DO YOU OWN ALL THE LANDS IN  B. Proposed	TWP. Z.5 THE EXIS	RG 30	A CE OF L	Grands V	COUNTY  YES	NO-I	PARCEL #  18/82 300 0  F NO, PROVIDE OWNER(S)	# OF ACRE
LE  Wells 1, And 2  F Sec. 16, T.  N N SEC.  SE 14 SW 14 16  DO YOU OWN ALL THE LANDS IN  B. Proposed  Wells (1) AND (2);  75 N N R 30	TWP.  ZS  THE EXIS  LEGAL D	RG 30	E. ACE OF I	Graduse?	COUNTY  THE YES  WHERE NE	NO-I	PROPOSED:	#OF ACRE
LE  Wells 1, And 2  P Sec. 16, T.  N N SEC.  SE 14 SW 14 16  DO YOU OWN ALL THE LANDS IN  B. Proposed  Wells (1) AND (2);  75 N R. 30	TWP.  ZS  THE EXIS  LEGAL D	RG 30	E. ACE OF I	Graduse?	COUNTY  YES  WHERE NET  S/2  AW/4  COUNTY	NO-I	PARCEL#  18/82 3000  FNO, PROVIDE OWNER(S)  PROPOSED:  1, AND SW 44	# OF ACRE  / GO  NAME:  # OF ACRE  # OF ACRE
A. Existing  LE  Wells 1, And 2  P. Sec. 16, T.  14 14 Sec.  SE 14 Sec 14 16  DO YOU OWN ALL THE LANDS IN  B. Proposed  Wells (1), And (2);  ZSN., R. 30,  Vells (3), (4), (5)  14 16 Sec.	TWP.  ZS  THE EXIS  LEGAL D  144  6 ACI	RG 30 STING PLA ESCRIPT ACVES RG	ACE OF I	Grandt	COUNTY  YES  WHERE NEW  COUNTY	NO-II  NO-II  SELL  Sec.	PARCEL#  PARCEL#  PROPOSED:  AND SW 4  PARCEL#	# OF ACRE  160  NAME:  # OF ACRE  # OF ACRE  160
LE Wells 1, And 2 P Sec. 16, T.  14 1/2 SEC.  SE 1/4 SW 1/4 1/6  DO YOU OWN ALL THE LANDS IN  B. Proposed  Wells (1), And (2);  [25 N., R. 30, Vells (3), (4), (5) 1	TWP.  ZS  THE EXIS  LEGAL D  144  6 ACI	RG 30 STING PLA ESCRIPT ACVES RG	ACE OF I	Grandt	COUNTY  YES  WHERE NET  S/2  AW/4  COUNTY	NO-II  NO-II  SELL  Sec.	PARCEL#  18/82 3000  FNO, PROVIDE OWNER(S)  PROPOSED:  1, AND SW 4	# OF ACRE  160  NAME:  # OF ACRE  # OF ACRE  160
A. Existing  LE  Wells 1, And 2  P. Sec. 16, T.  14 14 Sec.  SE 14 Sec 14 16  DO YOU OWN ALL THE LANDS IN  B. Proposed  Wells (1), And (2);  ZSN., R. 30,  Vells (3), (4), (5)  14 14 SEC.	TWP.  THE EXIS  LEGAL D  144  TWP.  THE PRO  THE PRO  Our propace of u	RG 36 STING PLA ESCRIPT ACVES RG POSED F	E. ACE OF I	Grant LANDS V	COUNTY  YES  WHERE NEW  COUNTY  YES	NO-II WUSE IS I	PARCEL #  /8/82 300 0  F NO, PROVIDE OWNER(S)  PROPOSED:  // AND S W 44 0  PARCEL #  - IF NO, PROVIDE OWNER(S)	# OF ACRE  / 60  NAME:  # OF ACRE  / 60  White is a second content of the content

## ATTACHMENT FOR APPLICATION FOR CHANGE

Point(s										
	SOURCE		NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Wei	1		1	NE	Sw	16	25	30	181823000	
Wel	1		2	NW	SE	16	25	30	181822001	4
Wel			3	SW		15	24	29	180665000	6
Wal			4	NE	1	10	24	29	180645000	
Wel			5		SE		25	29	18083 1000	
									7333	
00 YOU O	WN THE ABO	OVE POINT(	S) OF DI	VERSION	MITHDI	RAWAL?	YES	□ NO -	IF NO, PROVIDE OWNER(	(S) NAME:
Purpo	se(s) o	f Use -		Existir	ng 🗌	Propos	sed:	*		
1 12/1	PURE	OSE OF US	E		G	PM or CF	S ACR	E-FT/YR	PERIOD O	OF USE
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Place	of Use	- □ Ex	isting		Propos	sed:				
Place	of Use	- 🗆 Ex	isting				TION OF LA	NDS		
Place	of Use	- □ Ex	isting				TION OF LA	NDS		
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Place	of Use	- □ Ex	isting				TION OF LA	NDS		
Place	of Use	- □ Ex	isting				TION OF LA	NDS		
Place	of Use	- □ Ex	isting				TION OF LA	NDS		
Place	of Use	- □ Ex	isting			DESCRIPT	COUNTY	NDS	PARCEL#	# OF ACRES
					LEGAL	DESCRIPT		NDS	PARCEL#	# OF ACRES

6.	Remarks and Other Relevant Information:
1 2	This application has a certificate that 15 cluded with Certificate 63-01539-C.
T	der Cent 63-015 39 C.
IF F	FOR SEASONAL OR TEMPORARY, START DATE/ END DATE//
of	ertain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department Revenue has requested notification of potential taxable water right related actions and therefore may be provide that copy of this request.
	ease contact the State Department of Revenue for further information. The phone number is (360) 570-3265. le address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.
7.	Signatures:
	I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.
	Topak Land, INC.  Philip Isaak (President)  (Applicant)  Tsaak Land, INC.
	Isaak Land, INC.
	Philip Israel (President)  4/2/09 (Water Right Holder)  4/2/09 (Date)  Filip Israel (President) (Land Owner(s) of Existing Place of Use)  4/2/09 (Date)
	ISAAK KAND, INC.
	Philip Isack (Prendent) (Land Owner(s) of Existing Place of Use)  4/2/09 (Date)
	IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.
	WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):
	☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
	□ ADDITIONAL SIGNATURES REQUIRED □ SECTION IS INCOMPLETE
	□ OTHER/EXPLANATION:
	STAFF: DATE:/